21-51232

FORM D RECEIVED SERVICE SERVIC

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB Number:	3235-0076		
Expires:	May 31, 2005		
Estimated avera	ige burden		
ha aar	40.00		

SEC USE ONLY Prefix Serial DATE RECEIVED			
Prefix	Serial	_	
DA	TE RECEIVED	_	
	1		

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Wyndhaven Limited Partnership Tax Credit Notes, 2002 (Wyndhaven Apartments Pro	ject)
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	Oroe
A, BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	02066634
Wyndhaven Limited Partnership, an Oregon limited partnership	
Address of Executive Offices (Number and Street, City, State, Zip Code) 2164 SW Park Place, Portland, Oregon 97205	Telephone Number (Including Area Code) (503) 944-6504
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
The Issuer will acquire, construct and equip a multi-family housing project in Hillsboro	o, Washington County, Oreg PROCESSED
Type of Business Organization corporation business trust Iimited partnership, already formed limited partnership, to be formed	lease specify): JAN 09-2003

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

2. Enter the information requested for the	following:		
• Each promoter of the issuer, if the	-	*	•
		irect the vote or disposition of, 10% or more o	
Each executive officer and director	r of corporate issuers and of	f corporate general and managing partners o	f partnership issuers; and
 Each general and managing partner 	r of partnership issuers.		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
GSL Wyndhaven Investors, LLC, an	Oregon limited liabilit	ty company	
Business or Residence Address (Number ar			
2164 SW Park Place, Portland, Orego	on 97205		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer Member and Manager (of General Partner) Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
GSL Investors Master LLC			
Business or Residence Address (Number ar	- · · · · ·	ode)	
2164 SW Park Place, Portland, Orego	on 97205		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer Director and Member (Member/Manager of General Partner)	General and/or Managing Partner
Full Name (Last name first, if individual)		STATE OF THE STATE	
Bell, David			
Business or Residence Address (Number ar	· · · · · · · · · · · · · · · · · · ·	ode)	
2164 SW Park Place, Portland, Oreg	on 97205	·	
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer Director and Member (Member/Manager of General Partner)	General and/or Managing Partner
Full Name (Last name first, if individual)		Communication of the Communica	
Grodahl, Walter			
Business or Residence Address (Number ar		ode)	
2164 SW Park Place, Portland, Oreg	on 97205		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer Director and Member (Member/Manager of General Partner)	General and/or Managing Partner
Full Name (Last name first, if individual)			
Sweeney, Robert			
Business or Residence Address (Number ar	* * *	ode)	
2164 SW Park Place, Portland, Orego	on 97205		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number an	nd Street, City, State, Zip C	ode)	
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number an	nd Street, City, State, Zip C	ode)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

						FOLVIAT	(i Triville)						
							41- 4.			_		Yes	No
1.	Has the	issuer sold	, or does th			ll, to non-a				_			X
	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?												
2.	What is the minimum investment that will be accepted from any individual?									•••••	\$ <u>100,</u>	000.00	
3.	Does the	e offering p	oermit joint	ownershi	p of a sing	le unit?	************		*************			Yes	No ≭
4.			-		•						irectly, any	_	u
	commis	sion or simi	lar remune	ration for s	olicitation	of purchase	rs in cónne	ction with	sales of sec	urities in tl	he offering.		
											with a state ons of such		
						on for that				ciated pers	0113 01 311011		
Full	Name (I	Last name i	first, if indi	vidual)									
		Investme											
						ty, State, Z							
-					and, Oreg	on 97204	(of G	eneral Partn	er)				
Nam	ie of Ass	ociated Br	oker or De	nier									
State	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers						
	(Check	"All States	" or check	individual	States)		*,					X All	States
	[AL]	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	н	ĪD
	IL	ĪN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	$\overline{\mathbf{W}}\mathbf{V}$	WI	WY	PR
Full	Name (I	Last name i	first, if indi	vidual)									
													
Bus	iness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Lip Code)						
Nan	ne of Ass	ociated Br	oker or De	aler									
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers						
Stat												□ A1	l States
	(Check	All States	O) CHECK	11101710001	States)	,	*,**************	••••••		***************************************	••••••	⊔	
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
	MT	NE	NV	NH	NJ	NM)	NY	NC	ND	OH	OK]	OR	PA
	RI	SC	SD	TN	TX	UT]	VT	VA	WA	WV	WI	WY	PR
Full	Name (Last name	first, if ind	ividual)		•						·	
Bus	iness or	Residence	Address ()	Number an	d Street, C	City, State,	Zip Code)						
			,		,	• • •	. ,						
Nan	ne of Ass	ociated Br	oker or De	aler									
Stat	es in Wh	ich Person	Listed Ha	Solicited	or Intends	to Solicit	Purchasers						
										••••••••		☐ Al	l States
	AL	ÂK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	[ID]
	IL	IN]	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

	The state of the s	ar the part that shart return in		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price	An	nount Already Sold
	Debt	3	\$ 5,	750,000.00
	Equity			
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	3	\$	
	Partnership Interests	S	\$	
	Other (Specify)	S	\$	
	Total	5,750,000.00	\$ 5,	750,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number	ים	Aggregate
		Investors		f Purchases
	Accredited Investors		\$ <u>5</u>	,750,000.00
	Non-accredited Investors		\$_	
	Total (for filings under Rule 504 only)	0	\$_	0
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of	D	ollar Amount
	Rule 505	Security		Sold
	Regulation A		³	
	Rule 504			
	Total	27//	\$_ \$	
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	13/13	<u> </u>	
	Transfer Agent's Fees		\$	6,500.00
	Printing and Engraving Costs		\$	
	Legal Fees	X	\$	13,000.00
	Accounting Fees	_	\$	
	Engineering Fees		\$	
	Sales Commissions (specify finders' fees separately)		\$	57,500.00
	Other Expenses (identify)		s	
	Total		s	77,000.00

(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	的自由的方式的数	
b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$ _5,673,000.00
5. Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
	Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees	\$	\$
Purchase of real estate		
Purchase, rental or leasing and installation of machinery Member and Manager and equipment (of General Partner)		
Construction or leasing of plant buildings and facilities	\$	□ \$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		_
Repayment of indebtedness		
Working capital		_
Other (specify): Acquiring, constructing and equipping of building and facilities		
Capitalized interest on the Securities	\$	\$ 418,584.03
Column Totals	\$	\$ 5,673,000.00
Total Payments Listed (column totals added)	□ \$ <u>5,67</u>	73,000.00
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Ru	on, upon written	
Issuer (Print or Type) Signature Da	te	
Wyndhaven Limited Partnership	12-6-0	2
Name of Signer (Print or Type) Fitle of Signer (Print or Type)	······································	
Walter O. Grodahl, III Member of GSL Investors Master LLC Member/Manager of GSL Wyndhaven Investors I	LC, General Pa	rtner of Issuer

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

1.	ls any party described in 17 CFR 230.262 provisions of such rule?		•	Yes	No 🗷					
	S	ee Appendix, Column 5, for state	response.							
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.									
3.	The undersigned issuer hereby undertakes issuer to offerees.	to furnish to the state administrate	ors, upon written request, informa	ation furi	nished by the					
4.	The undersigned issuer represents that the limited Offering Exemption (ULOE) of the of this exemption has the burden of estable	state in which this notice is filed a	and understands that the issuer cla							
The issu	er has read this notification and knows the co thorized person.	ntents to be true and has duly cause Member and M (of General Part		alf by the	undersigned:					
Issuer (Print or Type)	Signature	Date							
Wynd	haven Limited Partnership									
`	Print or Type)		Member of GSL Investors Master LLC							
Walte	r O. Grodahl, III	Member/Manager of GSL Wyndhaven Investors LLC, General Partner of Issuer								

Walter O. Grodahl, III

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

COLUMN TO									
1	Intendato non-a	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULC (if yes, attach explanation of waiver granted (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
СО									
CT									
DE									
DC									
FL									
GA									
ні									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI								ļ	
MN									
MS									

1	Intend to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ									
NE									
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
ОН							-		
OK									
OR					•				
PA		х	Debt	1	5,750,000				
RI			, a.a., , a.a. a.a. a.a. a.a. a.a.						
SC									
SD									
TN									
TX									
UT									
VT	_,.,				:				
VA									
WA									
wv									
WI									

1	1 2 3 Type of security					4		1 -	lification
	to non-a	to sell ccredited s in State -Item 1)	and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				attach ation of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									